

Debra Vanderbeek
(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 18 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s)	Debra Vai	nderbeek, Robei	t Clegg, Periklis Karouta	s, Leann Moccia
II. Name of lobbyist's parti	nership, firm or	corporation, if a	ny:	
Legislative S	Solutions, L.L.C.			
(Name of pa	rtnership, firm or o	corporation)		
P.O. Box	10724	Bedford	NH	03110
Business Address: (Street)		(Town/City)	(State)	(Zip Code)
() 603-986-9145	()	_{e-mail} dbeek	@aol.com
(Telephone)		(Fax)		
□ All reportable transaction	tions which are	not attributable to	-	u may file a separate report for to the following client:
OR (Full	Name of Client as	it appears on the Lo	bbyist Registration Form)	
unrelated to any particular cl IV. Date of Report Apr	-	-	byist's family), or the lobb July 26, 2017 activity from 4/1/17 to 6/3	
	ober 25, 2017 from 7/1/17 to 9/3		January 31, 2018 activity from 10/1/17 to 1	
V. There have been no fee If this box is checked, complete Concord, NH 03301.				
	s or made expend	litures, you must f		nd Expenses Report of Honorariums or
Expense Reimbursement	C 11 1	1:4: 1	utiana rom must fila Adde	andum C Political Contributions
Sworn Statement/Affirmat	ion by Lobbyist -B, RSA 14-C a	nd R SA) 664 and h		endum C— Political Contributions the foregoing information is true
(Signature of lobbyist)	7	<u> </u>	April 1	8 2017 (Date)

LEASE PRINT

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Debra Vanderbeek, Robert Clegg, Periklis Karout	as, Leann Moccia
II. Name of lobbyist's partnership, firm or corporation, if any:	
Legislative Solutions, L.L.C.	
(Name of partnership, firm or corporation)	
III. Name of Client Injured Workers' Pharmacy	Date April 18, 2017
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$ <u>7500.00</u>
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ <u>0</u> ear)
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>7500.00</u>
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>0</u>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business as than \$10 that is given to the person ad with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of a cer than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 7500.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ <u>0</u>
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0

d) Total expenses for this reporting period	d) \$ 7500.00
(Add lines a, b and c)	
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>0</u>
f) Total of all expenses year to date	f) \$ <u>7500.00</u>
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	
01/1/6	April 18, 2017
(Signature of lobbyist)	(Date)
Debra Vanderbeek	
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or	r corporation:	Legislative Solutio	ns
Name of Client (leave blank if Stateme	ent is for the partne	rship, firm, or corpo	oration and not related to any
particular client):	a Worker	15' Pharma	9W
U		·	/
Date of Report (check one):			
April 26, 2017 Duly 26, 2017	October 2	25, 2017 □ Ja	nuary 31, 2018 □
I have read RSA 15, RSA 15-B, RSA the following Addendums submitted v submitted):			
Addendum A(s).			
Addendum B(s).			
Addendum C(s).			
I hereby swear or affirm that the forego complete to the best of my knowledge a (Signature of lobbyist)	oing information or and belief.		each Addendum is true and 1 18, 2017 (Date)
(Print Name of lobbyist)			

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Statement/Affirmation by Lob	byist
Statem	ent of Income and Expenses for	r:

Name of Lobbying partnership, firm, or corporation: Legislative Solutions					
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client):					
Date of Report (check one):					
April 26, 2017 🗓 July 26, 2017 🗆 October 25, 2017 🗆 January 31, 2018 🗆					
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):					
Addendum A(s).					
Addendum B(s).					
Addendum C(s).					
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. (Signature of lobbyist) (Date)					
(Signature of lobbyist) (Date)					
Periklis Karoutas					
(Print Name of lobbyist)					

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Staten	nent/Aff	irma	ıtion	by	Lobbyist
Statem	ent of	Income	and	Expe	ense	es for:

•	
Name of Lobbying partnership, firm, or corporation: Legislative Solutions	_
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to ar	ıy
particular client): In Juned Werklers' Pharmacy	_
Date of Report (check one):	
April 26, 2017 ☑ July 26, 2017 □ October 25, 2017 □ January 31, 2018 □	
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true an complete to the best of my knowledge and belief.	ıd
(Signature of lobbyist) April 18, 2017 (Date)	
Leann Moccia (Print Name of Johnvist)	